STATEMENT OF ORGANIZATION		OFFICE USE ON
Name and Address of Committee	2. Date of this Statement	1 5/n
Committee to Elect Neil Abramson	1/13/14	1/18
5500 Prytania Street, #314	Estimated Membership	'
5500 Prytania Street, #314 New Orleans, LA 70115	1	
Check If:	4. Amended Statement?	7
New Committee Monthly Filer	YesNo	Rec # 80194 #1455
5. All Committee Officers and Directors (including Chairperson, Treasurer	, if any, and any other committee	
a. <u>Name</u> b. <u>Position</u> Ne. I Abramson Treasurer	c. Address 1500 Prytonia St	Lreet, #314 New Orlean, LA 70115
Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly or indirectl	lirectly established, administers, o	or financially supports this committee.)
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee
IX/A		
All Depositories for Committee Funds (committee funds must be depos funds.)	ited in one or more banks or savi	ngs and loan institutions or money market mutual
a. <u>Name</u> b. <u>Address</u>	1	1 4 7 9 11 6
Capital One 830 Jefferson	Ave, New Orlean	15, LA 10113
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Che Committee	ck one: X Principal Cam	npaign CommitteeSubsidiary
b. Name of Candidate Neil Abranson		c. Office Sought by the Candidate State Refresentative District 98
9. a. Name of Person Preparing Report Neil Abramsun		
b. Daytime Telephone 504-581-79	79	
10. WE HEREBY CERTIFY that the information contained in this STATEM and belief.	ENT OF ORGANIZATION is true a	and correct to the best of our knowledge, information
This 13th day of January , 2014	<u>1</u> .	
Mal day		504-581-7979
Signature of Committee Chairperson	Da	sytime Telephone Number
Signature of Committee Treasurer, if any	Da	aytime Telephone Number